# SURAKSHA

Early Childhood Care and Education in India

## HOME AWAY FROM HOME



Family Day Care In Bombay Vrinda Dutta

#### The SURAKSHA Series

HOME AWAY FROM HOME

Family Day Care in Bombay

Vrinda Datta

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## SURAKSHA

Early Childhood Care and Education in India
Volume 1

HOME AWAY FROM HOME Family Day Care in Bombay

by

Vrinda Datta

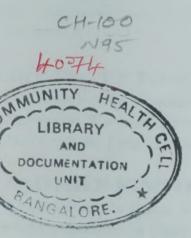
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### FOREWORD

Every human being ultimately is the product of interaction between the genotype (inherent genetic make up) and the environment. While heredity determines potential, the home, health and educational environment determine whether young children bloom or remain "blossoms in the dust". There is a well-known saying - as the twig is bent, so the branch will grow. It is in this context that Early Childhood Care and Education assume critical significance with reference to giving the child an enabling environment for the full expression of his/her innate potential for physical and mental development.

lam happy that through the SURAKSHA series of publications, a careful chronicling of the many excellent examples of Early Childhood Care and Education in India is being undertaken. This series will enable scholars and researchers as well as policy makers and practitioners to learn from the rich diversity of experience available within our country in this field. Such an understanding is fundamental to learning from successes and thereby helping to replicate effective and economically viable models of day care.

This series has been lovingly put together and is the result of close cooperation among the many people who have worked hard on it. On behalf of the Foundation, I must particularly thank the members of the Advisory Committee, who have given unsparingly of their time and effort, the distinguished scholars who have written the case studies, the agencies whose work has been documented and the Aga Khan Foundation (India) for their support.

M. P. Swamwatta

M.S. Swaminathan

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- the agencies, who have participated wholeheartedly in the process of documentation and helped to maintain the balance between objective reporting and passionate involvement.
- the reviewers, who have been a tremendous source of strength in maintaining quality but have of necessity to remain anonymous

and

• the many others, all of whom it is not possible to list, for their constant support which made this series possible.

### EDITOR'S NOTE

The SURAKSHA series has grown from an idea which has been germinating a long time. Scholars have long felt the need for documentation of Early Childhood Education Care and Education programmes in India. While there has been a wealth of experience in the country, with many small-scale experiments under the leadership of outstanding thinkers and educational leaders, it has been realised that hardly any of it has been recorded for a wider public.

The vast diversity in the situations of women and children in the country imply that child care services, especially day care, would vary widely in response to local and specific needs. At the same time, programmes for young children, by their very nature must be highly personalised, direct, small in scale, and rooted in local culture and relationships. Diversity and responsiveness to needs are hence an essential characteristic of successful programmes for young children. In the last two decades, with the rapid expansion of child care programmes like the Integrated Child Development Services (ICDS) in the State sector, it has become all the more important to draw the attention of policy makers to the importance of the flexibility and responsiveness represented by these multiple approaches. Documentation has thus emerged as an essential tool for advocacy.

It was with the twin objectives of dissemination and advocacy that Project ACCESS embarked in 1993, with the support of the Aga Khan Foundation (India), on the project entitled Multiple Approaches in ECCE in India, with a view to bringing out a series of studies documenting innovative approaches to ECCE in India. Dr.T.S.Saraswati, Head, Department of Human Development and Family Studies, M.S. University of Baroda, who has for long been urging the need for such documentation, was an incomparable guide and adviser in launching the project. With the help of an Advisory Committee consisting of distinguished representatives from several disciplines, ranging from Child Development and Education to Management and Women's Studies, criteria were drawn up for

selection of programmes to be included in the series and procedures were developed for a participatory process of documentation.

The series of case-studies represents a wide range of experiences in terms of geography, auspices and structure. The locations range from the Himalayan region to the coastal South, from industrial metropolis to rural or tribal hamlets. The programmes are run by diverse institutions - voluntary agencies, trade unions, educational institutions and women's groups. The programmes include spontaneous private efforts as well as statutory obligations and government/non-government partnerships; they are employer-funded and union-sponsored, school-based or community based. The common element is a commitment to address the intersecting needs of women, young children and girls. In addition, each programme is need-based, client-oriented and responsive, a system of optimal size with a minimum life of three years, caters to lower socio-economic groups and is non-profit making in nature. The series title SURAKSHA was chosen for its rich resonance implying an all embracing, nurturant care, visually represented in the logo; while the colour of each cover is intended to evoke the specific geographical context

The process of developing the studies has been a participatory one, involving a researcher/writer working closely with the agency concerned, and providing opportunities for sharing and mutual learning among the agencies through a network and occasional meetings. The studies are process-oriented in nature and not merely descriptive, focusing both on the unique features and the replicable aspects of each programme, finances, sustainability, the child care worker, the organisational structure and relevant linkages. The concluding part in each case dwells on implications of the programme for wider policy initiatives for young children. An overview of the economics of child care is expected to follow the last study in the series.

Each study is unique and the present study, which is the first in the series to be published, is no exception. It is the only one in the series which concerns itself with a middle-class urban setting, and with activities which could be described as "profit-making". It is also

the only one which is not about a programme run by an institution, but is a perceptive account of the large number of family day care centres which have spontaneously sprung up as a private response to the needs of urban working mothers in Bombay, similar to those in many large cities of India. Yet it has been included in the series, for good reason. Precisely because of the unplanned, spontaneous and uncoordinated nature of the response, the extent to which it meets needs, and the service to a distinctly identifiable community, it has many lessons to teach both scholars and policy makers. It could mark the beginning of a new trend in child care.

January 1995

Mina Swaminathan Series Editor



HOME AWAY FROM HOME FAMILY DAY CARE IN BOMBAY

## ABOUT THIS VOLUME

#### The Author

Dr. Vrinda Datta, Reader at the Tata Institute of Social Sciences, Bombay, whose doctoral thesis was on group care for children, has studied the Family Day Care system in detail. She has also contributed to its enhancement through training and networking.

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Naina Mogre

## 1.THE NEED FOR CHILD CARE SERVICES

Urban working women and the need for child care services

During the decade 1981-91 the total number of female workers in India reached the figure of 9.1 crores, showing an annual growth rate of 2.39 per cent (Census 1991 and Saxena 1985). Of these, 1 crore are in urban areas. In Bombay alone, there are today 4.8 lakh main workers (women) with another 34, 443 marginal workers, taking the total of working women in Bombay to 5.1 lakh, as against 3.04 lakh in 1981.

The categories trade and commerce, transport and communication and other services have a large number of working women. As can be seen from Table 1, the employment of women in Bombay was mostly in non-agricultural occupations. According to the 32nd National Sample Survey, females comprised only fourteen per cent of the total skilled workers. The majority of skilled women in urban areas were employed in service or light manufacturing units. More than seventyfive per cent were in service-oriented occupations, particularly tailoring, typing and nursing (Nayyar and Sen 1987). This may also broadly represent the current situation.

Table 1 Distribution of working women in Bombay by occupational category (1981)

Cultivation	400
Agricultural labour	483
Livestock/forestry	***
Mining/Quarrying	389
Household industry	9,405
Other than household industry	63,478
Construction	10,637
Trade & Commerce	48,297
Transport & Communication	15,258
Other services	1,56,472
Total	3,04,819
Source: Census 1981,	

A factor which has facilitated the employment of women is the wide range of occupations caused by increasing diversity in contemporary production and the services sector. Thus, in spite of traditional notions restricting females working outside homes, a combination of forces and facilities in modern living promote female employment (Shariff and Swami 1981). The acceleration of middle class women in employment

occurred because of the widening of the public sector. Employment in semi-government undertakings has also increased. Middle level educated women are generally employed as clerks, secretaries, telephone operators, receptionists, etc. while highly educated women work as college teachers, doctors and in management cadres. The banking industry has also been opening its doors to women, particularly after the late sixties and early seventies (Desai and Anantaraman 1982).

In his analysis, Reddy (1979) shows the relation of age and education to female work participation. There appear to be two educational thresholds. The first begins with matriculation and rises steeply with those with diploma of less than graduate standard. With further increase in the level of education, participation rates reach a trough in the case of ordinary graduates and again rise steeply with post-graduate professions and teaching. Reddy also points out that urban female participation rates show a trend similar to that obtaining in the developed countries. It increases between twenty-five and twenty-nine years, but drops

between thirty and thirty-nine years, suggesting withdrawal of a part of the female work force on account of responsibility in childbearing and rearing.

Marriage and children may often cause constraints in continuation of work. Mukherjee (1975) found that marriage and children are determinants to middle class women's work participation. Gupta (1984) in his study found that the size of the household, the number of male workers in the household and the number of children below the age of five years were important determinants of women being in the labour force. At the same time it has been observed that the major reason for woman entering the job market is economic. (Kapur 1974, Ramananamma et al 1984, Ranade et al 1970). Many women, in spite of having young children and no family support for child care, are in the labour force. Urban living itself poses many problems for working women. The expansion of the cities into far-off suburbs has created vast distances between home and workplace. Young couples are compelled to make their home in the suburbs and, with no kin network, they

The expansion of the cities into far-off suburbs has created vast distances between home and workplace. Young couples are compelled to make their home in the suburbs and, with no kin network, they are dependent on services from the community to run the family. One of the grave problems facing these young couples is the care of their young children.

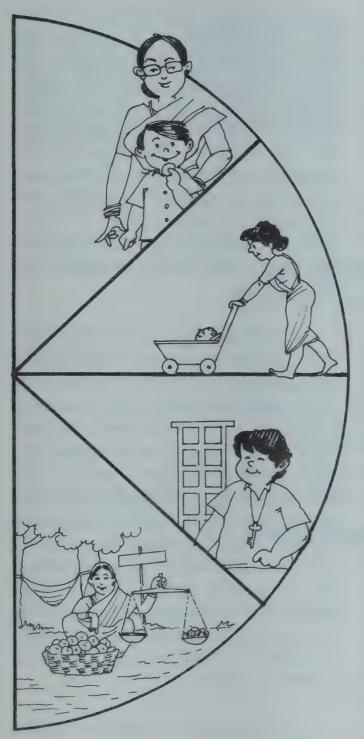


Fig 1: Types of informal care

are dependent on services from the community to run the family. One of the grave problems facing these young couples is the care of their young children. Whether it is educated working women, women in the unorganized sector or self-employed women, all of them face the problem of child care.

#### **Types of Child Care Services**

In the city of Bombay most child care services have developed out of the emerging urgent needs of working women. Fig 1 shows the various ways in which children are cared for. Basically child care can be divided into two kinds —in-home care and out-of-home care.

One of the most appreciated forms of child care is that given at home by a relative, generally a grandmother or an aunt. This arrangement is found to be most preferred and suitable because of natural ties, moulding the children into family traditions and convenience. The author's comparative study of various types of care has shown that children thrive better under relative care than under any other form of The grandmother is generally responsible for the care of the child and hence spends a lot of time interacting with the child, giving stimulation for optimal development. However, all working mothers are not lucky enough to have this support from the family.

Some mothers prefer to employ a maid who will take care of the child for the full day. Apart from being unreliable, very

often these arrangements are full of problems. The cultural differences, the illiterate background and the unreliability of the maid make it difficult for the child to gain much from such an arrangement. However till more appropriate group care services develop, mothers are forced to employ maids for child care.

The women who cannot afford to pay for such exclusive care do not have many options. Many of the self-employed women, like vendors or domestic servants, carry their children to the work place. Children in these circumstances are exposed to environmental dangers like heat, dust and noise. There are other mothers who leave the child behind in the neighbourhood with no one particularly responsible for the child. The child may help himself to food and wander around, exposed to environmental and social dangers. The phenomenon of latchkey children is also found in educated families, especially older children who prefer to remain independent and not attend any day care, which may not meet their needs.

One of the common solutions for the development of out-of-home child care, is the day care setting. A day care centre is a group care setting where children are looked after by appointed staff. In Bombay, day care centres run by government and voluntary organisations are mainly for disadvantaged families. Many studies have indicated that the facilities and services are poor in terms of lack of trained personnel, materials and space (D'Souza 1979, Rane et al. 1986, Paranjpe et al. 1981). The creches under the Factories Act are found to be few in number and under-utilised because of difficulties of commuting with the child. Thus factory creches today serve very few children. There need to be amendments in the law, like allowing male employees to utilise the facility, and developing a new cadre of child development workers who would look into organising an appropriate programme for young children.

There are a few centres in urban cities like Bombay where employers not coming under the purview of the Factories Act, have taken the initiative and started day care centres for their employees' children. Many Mahila Mandals too have taken this responsibility of child care. The study by the author on day care centres has shown that basically they are child-minding centres with hardly any programme or activities for children. Apart from physical care, nothing much happens in these centres. In some centres materials are present but not used by children. Staff in these centres are generally not trained and therefore do not know what programme to have.

As the need for child care started increasing, family day care emerged as another form of child care. Earlier, the working mothers would make informal arrangements with neighbours for care of their children.

Slowly these arrangements became paid arrangements. Now the caregivers take care of not one child alone but a small group of children and so has emerged the phenomenon of family day care services in some areas of Bombay.

These child care services have been studied in detail by the author and the following chapters give an understanding of this type of service and the potential it has to grow into a developmentally appropriate child care programme

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## 2. THE STRUCTURE OF FAMILY DAY CARE

#### Family day care - what it is

Family day care includes any out-of home care in a family setting by an unrelated individual. In return for the care of the child, the caregiver is given financial reimbursement. Though much research has been done on the features and comparative advantages of family day care and day care centres as child care services, there have been no definite answers about which kind is better.

Compared to day care centres, family day care appears to have many good features. It is a form of child care that provides a mother-like person in a home-like setting. This environment is more likely to provide warmth and security compared to a day care centre where the child is one among many children with many adults to attend to him. Considering the child's needs, family day care provides some scope for a one-to-one relationship with an adult, which is vital for the child in the development of cognitive, language and social skills. The young child also benefits from a small and mixed-age group, which are both characteristic features of a family day care. From the mother's point of view, family day care is a convenient and flexible programme. The mother can make arrangements for care of all her children,

arrange for convenient hours of care and allow flexibility to take care of emergencies. The mother also finds the location of family day care in her own residential area an added boon. This makes the child's adjustment easier. It also makes it possible to have a caregiver from a similar cultural and socioeconomic background. Besides, it is convenient to drop and pick up the child on the way from work.

#### How it began in Bombay

The entrance of the middle class urban women into the job market could be clearly seen in the post-Independence period. The services and professions provided greater opportunities to women. In the seventies, the public sector openings especially in banking, created newer avenues of work for women Thus it was accepted that women could work in economic crises. Families started depending on the women's income to maintain the standard of living and therefore women continued to be in employment through the childbearing and rearing years. The other aspect which forced women to be in employment during child bearing/rearing is that for those who left the job there would be fewer opportunities to get back into the job market, and besides part-time

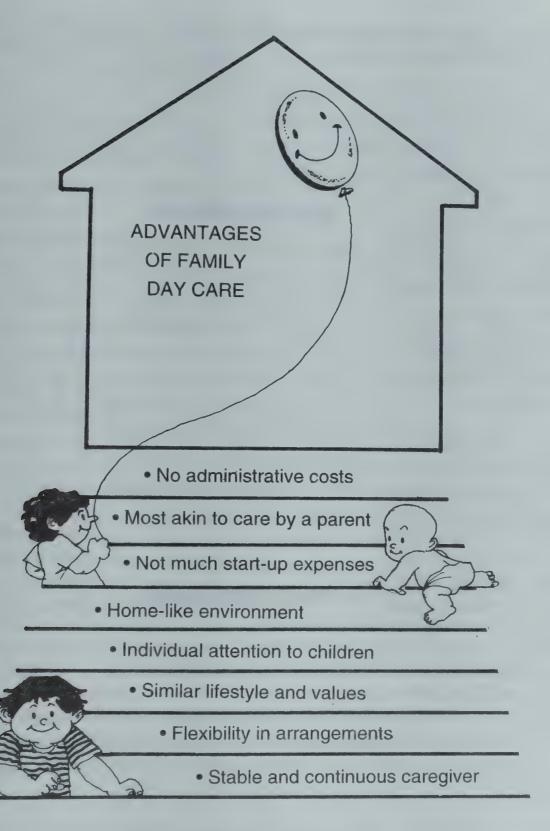


Fig 2: Advantages of family day care

jobs hardly exist for the women who would choose it for the sake of children.

Around the same time, the family was in a state of transition. Industrialisation and urbanisation led to migration of young workers, in turn leading to nuclear families in the urban setting. The expansion of

cities into far-off suburbs provided affordable housing to many young families. Thus with a nuclear family structure and working women, these families faced the problem of child care for their children.

Even today, the neighbourhood system is still very alive in cities like Bombay. If the family is not available, the next reliable person is the neighbour. Many working women started

making informal arrangements with their neighbours for the care of their children. As confidence started building, of both the mother and the neighbour, the system started taking shape. More mothers approached the neighbour for child care service, and one woman started looking after three or four children, for which she was given remuneration. Inspite of the urgent need, there were no efforts by the government to develop child care services for middle class

working women. So these women found family day care to be the only available child care service.

The expansion of family day care as a child care system took place in the late eighties. Although it is difficult to know the number of existing family day care

> homes, the concentration of such services is in the far off suburbs of Bombay, as affordable housing for young couples is only in the suburbs. These young couples with children find family day care services available in their very own localities. Sometimes caregivers are their own neighbours or at least in the same housing colony. In every building and in every housing colony there are likely to be family day

care services. In the last decade there has been a tremendous increase in residential complexes in the New Bombay area. Again affordable housing has attracted many young couples. The local child care system has taken shape here too and most working women depend on family day care in their own vicinity.

Now it is nearly two decades since these services have emerged and proved to

From the mother's point of view, family day care is a convenient and flexible programme. The mother can make arrangements for care of all her children, arrange for convenient hours of care and allow flexibility to take care of emergencies. The mother also finds the location of family

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be an answer to the needs of working mothers and children. Professionals, academicians and policy makers have to take a serious look at these services and take steps towards recognising them and developing inputs to improve their quality.

#### Profile of family day care in Bombay

The data on family day care has mainly come from two surveys done in Bombay. The first survey was for a study on developmental differences among children in group care and in home care. One of the forms of group care studied here was family day care. The family day care homes were from the western and central suburbs of Bombay, forty of which were covered in the present study.

The other forms of care studied in this research were grandmother and maid care. A total of eighty children experiencing the various forms of care were studied for their social and emotional development. The mothers of these children were contacted at two points of time: the first time was to get background information

about the family, and the second time was to collect information on the social and emotional development of the children.

The second survey was on 'group care as a context for child development'. This study looked at the differences in family day care and day care centres and also rated the child care for its quality. In this research 'snowball sampling' was used to get the sample of family day care which included far off suburbs of Bombay and the new area called New Bombay where lots of young migrant families find affordable housing and where the need for child care services is felt very strongly. A sample of sixty-six family day care homes were covered in this study. This study had information about eighty children and their families who were using family day care services.

Thus the present study drew upon the following:

Number of families	95
Number of children	95
Number of family day cares	66
Number of caregivers	66

The neighbourhood system is still very alive in cities like Bombay. If the family is not available, the next reliable person is the neighbour.

Many working women started making informal arrangements with their neighbours for the care of their children. As confidence started building, the system started taking shape.

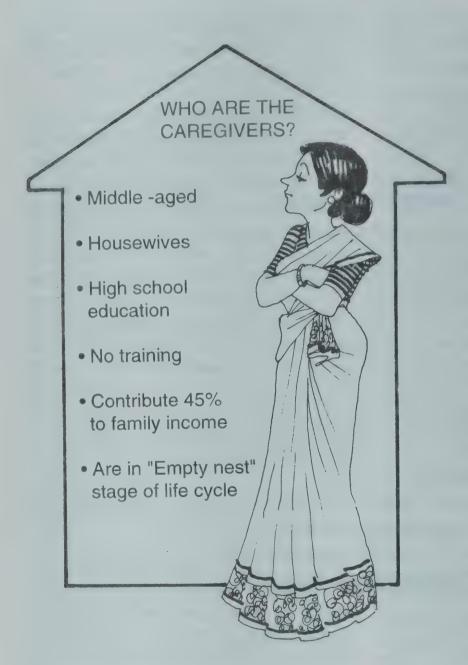


Fig 3: Who are the caregivers?

#### Who Are the Caregivers

Basically all family day care caregivers were housewives. Three groups of caregivers could be identified

• Women of about fifty whose youngest

child was sixteen.

- Women of about forty whose youngest child was about twelve and
- Women of about thirty, either unmarried or with a young child about five or six years old.

The average age of the caregivers is 44.3. It is clear that most providers are in the later stage of the family life cycle where responsibilities regarding child care have lessened leaving much more time at hand. This finding is similar to that of the study by Emlem (1977). Emlem studied day care providers and found them to be generally in a later stage of family life than their clients and saw a complementary fit between the needs of young working mothers with small children and those of caregivers whose nest was partially or entirely empty of young children.

The British studies of child-minders (Jackson & Jackson, 1979) showed a similar trend. The educational level of the caregivers was very low. About twenty per cent were educated upto secondary level, and forty-two per cent were educated upto SSC. None had any kind of training. It

appears that age and low educational level make it difficult for these housewives to find any other kind of employment. There may be many reasons for child care to be the chosen profession, but an important factor which attracts housewives to this profession is that it is homebased, requiring very little in terms of investment, from the caregiver's point of view. At the most, caregivers have to spend on toys and materials for children.

The caregiver also feels secure in the task of child care which is not very different from being a mother. The demand for child care is such that there is very little chance for it to become a failure and therefore it appears an attractive proposition. In running a child care service the caregiver is not answerable to anyone except the parent and therefore can run the service suiting her need and capabilities. Compared to any other job, profession or business, housewives find child care to be an appropriate enterprise. Welson (1982) identifies three factors linked with motivation for offering family day care: the need to earn a second income, the women's perception of the problems entailed in earning the same income as wage employees and a personal or ideological committment to remain at home.

At the macro level, family day care as a child care system may prove extremely profitable as it calls for no special space or staffing. It can expand rapidly with some inputs for training and materials.

#### Why they started

In the Bombay study, it was found that a large number of women started day care services to earn an income. The other reason given by caregivers was that day care is a much-needed facility for today's working mothers. At times mothers approached them to look after their children. Some women said that they were feeling

Emlem studied day care providers and found them to be generally in a later stage of family life than their clients and saw a complementary fit between the needs of young working mothers with small children and those of caregivers whose nest was partially or entirely empty of young children.

lonely and wished to pass their time more meaningfully. Typically, the provider did not start with a business perspective. This finding is similar to that of Emlem (1977) who observed that the older caregiver with less education and marketability tends to prefer to stay at home and do that for which she is best prepared by practice, experience and inclination - the day-to-day routine of raising young children.



Comforting a distressed child



In the garden

Looking at family day care as a profession, some disadvantages can be seen. On an average, when caregivers have six children in care, they could earn about Rs.1,500 per month, making a substantial contribution to the family income. If the caregiver realises the ease with which she can increase her income, she may at first increase the number of children in her care. which would automatically increase her monthly income. The increase in the number of children may not make any difference to her if she believes in custodial care. But it will definitely be difficult to give quality care. The second problem is that a child care worker over the years will not be able to earn more or climb a career ladder. This could act as a disincentive to many in giving continuing quality care to the children.

#### Getting clients

How do parents get to know about the existence of family day care? Half of the caregivers explained that once the decision to start day care was taken, advertising about the service was taken up. Many caregivers prepared pamphlets and distributed them in the neighbourhood. Some even advertised in newspapers. A handful of caregivers went from house to house to inform people about the service. Many observed that after two or three children had joined, the mothers of these children informed other people in need of this service. It seems that at the beginning, publicity methods were used,

and later parents themselves approached them. However, mothers who are new to the area, or others for whom the need has just emerged, have to start asking neighbours or friends to help in the search for child care services in the area.

On an average, family day care services have been functioning for seven years. A few were just three years old, while there were some with thirteen years of experience. There is a distinct relationship between the number of years the family day care home has been functioning and the number of children in care. Family day care homes which were functioning for eleven to thirteen years had an average of thirteen children each while those which were functioning for three to five years had an average of eight children each. Parents would always prefer to send their children to a place which is well-established and has an experienced caregiver. However, a large number of children in a home may lead to poor quality care.

There were on an average nine children in each family day care home while two or three had twenty children each. Many caregivers did not cater to infants while three-fourths of them had toddlers and preschoolers. Most of them did not have any criteria for admission except age. Typically the family day care had one caregiver in charge with occasional help from an ayah or one of their own family members - a young daughter.

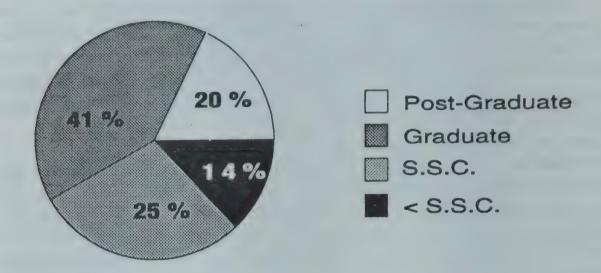


Fig. 4a: Fathers' education

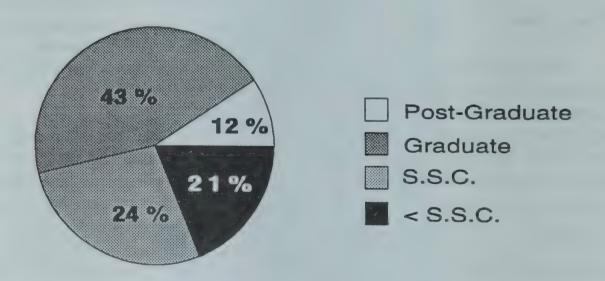


Fig. 4b: Mothers' education

#### Income through family day care

A lot of variations were observed in the amount charged for family day care services. Two main factors which determined the charges were the age of the child and the area in which the family day care home functioned. The fees ranged from as high as Rs.600 to a low of Rs.100 per month, the average being around Rs.250 per month. If the child was an infant, caregivers charged more because more effort and care is needed for this age-group. Another factor which influences the charges is the provision of food. Many caregivers give the option to parents. If parents require food to be served then they are charged extra.

On an average the caregiver earns at least Rs.2000/- per month. Some caregivers pay a salary to the ayah they appoint, while most others feel that their earnings need not be spent on expenses. The income from family day care constituted on average one-third (thirty five per cent) of the family income. Many caregivers reported that their income fluctuated as the income is affected by temporary withdrawal, illnesses or family vacation.

#### Profile of the clients (Parents)

Considering the families covered in the two surveys, data for about ninety-five families was available for analysis. Most families who used family day care services were nuclear families. A few families reported that even though the child's grandparents lived in the same house, the child attended a day care home as the grandparents did not feel competent to take up the responsibilities of child care. All the families were educated and had a good income, with both parents working. About half the families had two children. The majority of the families were Hindus, followed by Christians, then Muslims and other religions.

Looking at Fig. 4a, it can be seen that about twenty per cent of the fathers were post-graduates and some forty-one per cent were graduates: that is, nearly sixty per cent of the fathers were well-educated with many of them professionals like engineers, managers, etc. Of the remaining fathers some twenty-five per cent had been educated up to S.S.C. while another fourteen per cent had not completed the S.S.C.

On comparing the mothers' educational qualifications to that of the fathers' qualifications, (Fig. 4b) it appears that the mothers too were equally well-educated. In the sample, forty-three per cent were graduates, while some twelve per cent were post-graduates. Twenty-four per cent of the mothers had completed S.S.C. and some twenty-one per cent were educated upto less than the S.S.C. level. Thus the mother group was almost equally divided into a well-educated (graduate + post-graduate) group and a less educated (S.S.C. and less) group.

Table 2 A: Mothers' occupation

Table 2 B: Fathers' occupation

	No.	Percentage		No.pe	rcentage
<ol> <li>Doctor</li> <li>Business</li> <li>Lawyer</li> <li>Executive</li> <li>Bank Officer</li> <li>Teacher</li> <li>Clerk</li> <li>Secretary</li> <li>Typist</li> <li>Telephone Operato</li> <li>Nurse</li> <li>Packer</li> </ol>	5 5 2 4 5 15 22 9 7 7 5 5 5	5.3 5.3 2.1 4.3 5.3 15.7 23.1 9.4 7.3 5.3 5.3 2.2	<ol> <li>Executive</li> <li>Officer</li> <li>Engineer</li> <li>Teacher</li> <li>Sales</li> <li>Mill Worker</li> <li>Clerk</li> <li>Typist</li> <li>Machine Operator</li> <li>Lab Technician</li> <li>Steno</li> <li>Not available</li> </ol>	12 5 11 2 8 21 15 4 4 5 7	12.7 5.3 11.5 2.2 8.4 22.0 15.7 4.3 4.3 6.3 7.3
<ul><li>13. Punch Operator</li><li>14. Steward</li><li>15. Service</li></ul>	3 95	5.3 1.0 3.1 100.0		95	100.0

With this range of educational levels, the types of occupations of both mothers and fathers are quite varied. A very large number of women (twenty-three per cent) worked in clerical jobs, while sixteen per cent worked as teachers, with another twenty-one per cent in professions. Occupations like secretary (ten per cent), typist (seven per cent), telephone operator and nurse were some other common ones. (Table 2A).

The educated fathers were found to be executives (thirteen per cent), officers

(five per cent), and engineers (twelve per cent). There was also a large number (sixteen per cent) in clerical posts. The not-so-educated fathers were found to be mill workers (twenty-one per cent), machine operators (three per cent) and technical assistants (six per cent) (Table 2B).

Since most parents were in full-time employment, they seemed to find very little time to spend with children. It was observed that in families who used family day care, mothers spent an average of about three hours daily with their children. The

working mothers spent an average of six hours at work and another one and half hours for travel. Obviously, a mother who was away from home for eight to ten hours was bound to get very little time with her child. Particularly, mothers using family day care, spent more of their time in dropping and picking up the child and managing the housework as well .In this context, it is important to note that family day care must not only keep in mind the mother's needs but also satisfy the children's developmental needs. Since the family day care home is the place where the child spends more time than even at home there is urgent need to make this environment child-friendly and development-oriented.

#### Eligibility criteria

Every caregiver has a group of people in mind with whom she feels she can identify. When questioned on whether religion played a role in selection of children, most caregivers said that it was not an important factor. A related factor-language-was considered important by caregivers. Some caregivers were particular about taking only those children who spoke their language.

Most caregivers used age as criterion for admission and are reluctant to admit children below two years. A working mother who is looking for child care outside the home will obviously need child care when she is ready to resume her job after maternity leave. As there are so many caregivers who

refuse to take the very young, the mothers of these children have few choices. The main reason for caregivers not undertaking care of the child below two is that the children are not toilet-trained and are also dependent on the bottle. This being so, they need more attention which the caregiver cannot give if she has a large number of children. Also with younger children, health care is a major issue.

The point to be raised here is the usefulness of an eligibility criterion in the smooth functioning of the system. To a certain extent, cultural compatibility is essential because children spend most of the day with the family of the caregiver. If the cultures are divergent, then the caregiver is going to be confused as to what is right for her to do. The lifestyle of the caregiver's family will also influence the child. It is seen that the caregiver's criteria are practical since they help her in smooth functioning. However, the mothers have to be definitely clear about their own criteria. One factor which all parents looked at family day care is when selecting convenience.

The location of the Family day care home, the timings and flexibility are the first and most important considerations. Next, for the child, they look for love, warmth and security. As a mother reported-My son is so fond of mai that in the evening he is reluctant to leave her. She is very loving and he is happy with her.

## 3. THE FUNCTIONING OF FAMILY DAY CARE

Since the time spent in a family day care home forms a major part of the children's daily routine, the environment and activity there are of crucial importance for the child's mental, physical and emotional development.

#### Space

Many caregivers were living in flats while a few lived in chawls (tenements). Although no restriction was laid on space, with children being allowed to use the whole house, many caregivers did have space problems. At times, children were asked to sit quietly while the caregiver and her family went through various domestic chores. Running about and touching things which were not toys meant getting reprimanded.

Since most caregivers lived in flats or chawls, children's outdoor movements were very restricted. Children were indoors for six to eight hours a day, without much physical activity. Children were not even taken down within the building premises.

Except on Sundays, all through the week the children had no outdoor physical activity and play, which is developmentally inappropriate. While from the point of view

of the caregiver, no infrastructure or special space is required, it is restrictive to the children and in the long run, may even be counter-productive.

#### Working hours

It was found that many mothers living in suburbs had to travel long distances to reach the workplace, and therefore had to leave the children very early in day care, before they started their journey to work. Caregivers received children as early as seven thirty a.m. Children could come at any time of the day, so some children came early and left early while others came late and left late. As a result of this, caregivers were found to have nearly ten to twelve working hours. This is indeed long and attending to children for so many hours is a tiring job. Many providers have to handle parent's requests for extra work. Parents arrive late to pick up their children, or leave them for weekend care which creates additional burden for caregivers.

#### Materials and equipment

Many caregivers were surprised at the question as to what materials and equipment they had bought for the children

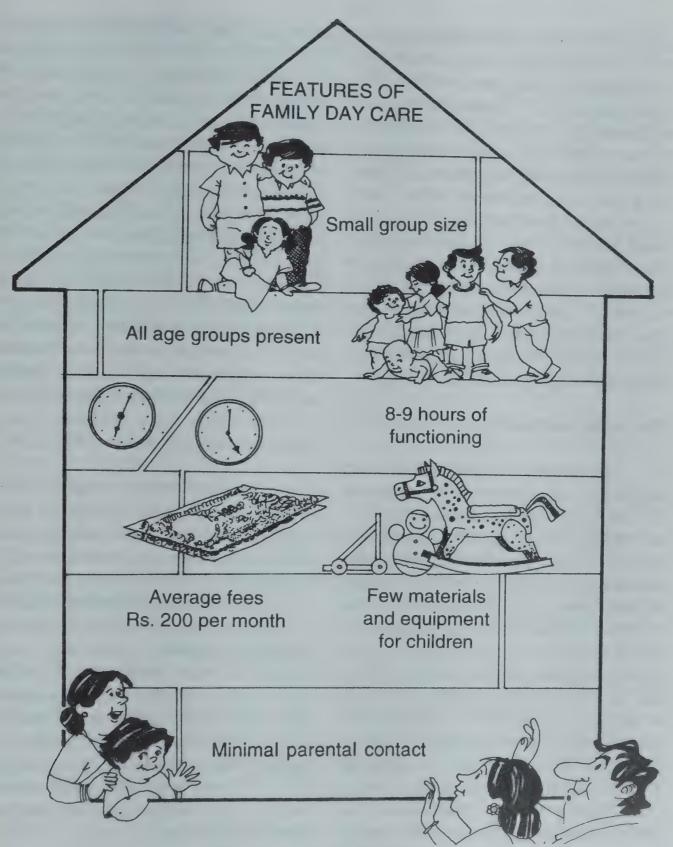


Fig 5: Features of Family Day Care

in their care. Most caregivers had spent no money to buy materials like toys even when they started the day care service. They merely kept a few household things for children to play with. Sadly, it was found that the caregivers did not spend anything from their earnings to buy things for the children. They did not consider it to be their responsibility. Some suggested that parents could send toys with the children, while others disagreed, as bringing toys from home was bound to create jealousy among children and when the toy broke parents would get upset. Still others felt no such materials were needed, as when children are together they do not need to play with toys.

#### The daily programme

As noted earlier, the neighbourhood family day care is extremely convenient for the busy working mother, but it is doubtful as to whether the children thus cared for are being provided with the mental and sensory stimulation so important for their growth and development. When children spend six to eight hours in family day care what they do throughout the day also becomes important. Where the number of children in care may be, for example, nine, all of them are not present at the same time. The caregiver spends a large amount of her time in getting children ready for school or when they are back, changing them, feeding them etc. She does not find time to spend with children in conducting

activities. There is no set programme for the day. Therefore children sit idle or play on their own or get bored. The older children manage to play a little on their own, but toddlers and infants are grossly neglected in terms of some stimulation. The characteristics of family day care are described in Figure 5. Many parallels can be drawn between the home setting and the family day care setting. Since the caregiving takes place in the home of the caregiver, she has to monitor children's behaviour like the parents. The caregiver has to control children's movements as there are many objects which are unsuitable for play. Also, since there are several children, more restrictions are laid down by the caregiver. This becomes essential for the children's safety but at the same time it diminishes curiosity and the need for activity.

Basically children's activity could be with the caregiver or with the other children. Since the caregiver has to perform various tasks as a housewife she is not able to spend time directly with children. But at the same time the household tasks themselves give opportunities to involve children in doing something together. It was very rarely observed that the caregiver and children were working together on any household task. Mostly the children would be left on their own to do whatever they chose while the caregiver moved about doing her various duties. Shared tasks will provide ample learning opportunities for language and concept development.

One observation regarding family day care in Bombay was that some of the caregivers had young daughters who spent a lot of time with the children once they came home from school/college. The children enjoyed this attention and activity after periods of boredom and loneliness.

The event which brought some activity in the family day care setting was the daily movement of the school going children. The other children were especially involved in watching and helping these children get ready for school. Also when these school children are present they play games, sing songs and provide some stimulation to the very young children.

The amount of caregiver involvement depended very much on the composition of the group. When infants were present in a group, the caregiver paid less attention to the other children, leading to more peer interaction. Also when there were a large number of children, the caregiver tended to be very authoritative.

Since there was no play material available, the children found it difficult to keep themselves occupied. With the coming of satellite television there has been even less scope for caregivers to spend constructive quality time with children; rather, the children spend most of their time watching television along with the caregivers, creating lethargy and passivity all through the day.

On the whole, one can say that the environment of the family day care is casual, with no programmes for children to play, learn and do. Family day care can become an appropriate child care programme only when caregivers start investing some time and energy in being with children constructively.

#### Health

Food and health are important aspects of group care. Many caregivers took no responsibility in providing food for children. They felt that the children all came from different backgrounds and so it would be difficult to please everybody's palate. Besides, parents start demanding particular foods. Some caregivers gave snacks like biscuits, wafers etc. when needed. The caregivers who provided food, gave one standard food such as rice and dal every day. The young child requires variety, and eating only one type of food every day may give no opportunities to taste and develop a liking for a variety of food which is very important in the toddler and preschool period.

Regarding illness, the caregivers followed simple rules. A child suffering from any kind of infection was not allowed to attend the day care till he/she had completely recovered. Caregivers felt answerable to other parents and there was always the risk of the infection spreading to many more children. Often, a child suddenly develops some ailment or shows

signs of sickness during the day. In such a situation, caregivers themselves administered some known household medicines, while others made it a point to call up the parents.

More than half the caregivers felt it necessary to discuss with parents the child's behaviour and activities, as otherwise parents would not know how their child was growing. As and when the need arose the parents gave instructions about illnesses. However, no regular meetings or discussions were held.

#### Quality of family day care

Over the past decade a considerable amount of research in day care has been conducted. A variety of investigations have explored a number of factors affecting quality. The welfare and development of the children must be the most important issue when considering quality. Therefore, what is offered to children in family day care in terms of environment, programme and personnel becomes very important.

The quality of twenty-nine family day care homes was evaluated on a rating scale developed by the author (1992). (Appendix 1).

In this rating scale there were twenty items to be marked on a seven point rating scale. Descriptions for every item had been provided to help the observer to know where and how exactly The welfare and development of the children must be the most important issue when considering quality. Therefore, what is offered to children in family day care in terms of environment, programme and personnel becomes very important.

the home should be rated. The twenty items were divided into four categories:

- 1) organisation (5),
- 2) personal care and routine (5),
- 3) furnishing materials /equipment (3)
- 4) activities with children (7)

#### Organisation

The rating scale showed that family day care had an average score of 3.2 on schedule. Basically there was no regular schedule. Maximum time was spent in routine tasks, with no fixed time for activities like games, songs etc. Since most of the caregivers had no training, the staff qualification item got a rating of 3.4 which showed that caregivers had experience but no training.

In terms of staff-child ratio the average rating was 4.0 which meant that on average the staff-child ratio was just



Meal time



A relaxed moment

appropriate. However, staff-child ratio should be seen in relation to age mix. If more infants are present, more adults are needed. The group size and age-mix in family day care got a score of 4 and above and 3.6 respectively. It seems that a group size of nine offers adequate supervision. But since there is an age-mix from infants to school going children it does interfere in smooth functioning.

### Personal care and routine

In family day care, there were varied situations during meal time. The caregivers were always apprehensive about parents' reprimands and would very often force the child to eat, lest the mother questioned as to why the child had not eaten. In some cases, the caregiver was hassled between the household chores and caregiving, even though she had a small group. Very often, in spite of asking for food repeatedly, the children were kept waiting for their meals. In many places, self-help was not encouraged, but there were some where children had a pleasurable meal time with self-serving, group eating and constant attention of the caregiver. On an average, the meal time was satisfactory, the average score being 3.9.

Nap-time was rated as good in general. Most caregivers gave a separate room for sleeping and all of them did have routine naptimes for children. However, in some cases, children were not given beddings. They slept on thin sheets on the

floor or slept across the beds. This made them uncomfortable as older children had their legs sticking out of the bed. Some caregivers forced children to sleep by threatening them.

Caregivers did take enough care to have hygienic practices in diapering/ toileting. They were particular on cleaning the soiled place and attending to the child properly, and were not harsh while dealing with the children. The caregivers also gave adequate attention to the child in changing and freshening up and ensured that they looked clean always. They were quite regular in this activity. The caregiver's behaviour during the child's arrival and departure was warm and responsive, giving attention, keeping the child ready and at times conversing with the mother. The score was an average of 3.9 on this item.

## Activity

In this area, family day care is truly far from satisfactory. Many homes had a space problem. There were no efforts made to make space available for children. There were times when children were asked to sit quietly on the bed till the caregiver and her family finished all their respective tasks, which may even exceed an hour at times. In some places children were constantly reprimanded if they ran about or touched things around the house which were not play items, especially when the adults were busy.

### Materials

The low score of 3.2 in this categoryshowed that materials were totally inadequate. Since most homes did not have toys and materials, older children played verbal games. However, younger ones because of their lack of verbal skills and lack of materials did not play much. The only things that they got to play with were old boxes, broken toys or old kitchen items.

# Development of children in family day care

There are very few Indian studies on development of children in child care and particularly in family day care. One of the studies done by the author (1993), showed that the type of care preschool children received, made a significant difference to the IO scores of children. The IO score as measured on Kamath-Binet test of intelligence was highest for grandmother care children (114.7), while the creche care group came second (111.6). The mother care group had a score of (108.1) and the maid care group was the last with a poor score of (105.9). The children in family day care benefited from mainly peer group interaction. Besides, because of the mixed age group the younger children learnt a lot from the older ones. This is also reflected in their verbal and performance score.

The social maturity of the same group of children was studied. The creche

children had the same score as that of grandmother care (6.9), but the children of non-working mothers scored the highest (7.2). The reason for this could be that for learning social skills the child needs to be given many opportunities to practice. Due to lack of time and the feeling of guilt for not doing enough for the child, the working mothers may do most of the tasks for the child, while non-working mothers may be able to provide more time and opportunities for learning skills for self-help.

The second aspect in child care research which is gaining tremendous importance today is what happens in these child care places. The study by the author (1992) on quality of child care and implications for child development showed that children (toddlers) in family day care and particularly high quality care had more adult interaction than children in day care centres. The caregivers in family day care provided more socio-emotional stimulation, and the children benefited from small group size and a home-like environment. The study also showed that the children in family day care which was of poor quality, indulged in non-play activities or simply brooding.

## Caregivers' role and perceptions

In an urban metropolis like Bombay, neighbourhood child care has become a very common phenomenon, for various reasons; the scarcity of other forms of child care, the pressures of urban living, and the traditional

views on women's role which stops many a woman from entering the labour market. At the same time monetary needs make it necessary for some to take up incomegenerating activities which do not affect their wife-and-mother role. The value placed on home, love and security by most families makes family day care an attractive proposition.

The intense and diverse nature of work creates a demanding daily work schedule for the caregiver. The caregivers' work structure is determined by the parents' working hours. The caregiver finds that because the parents of children in her care have staggered working hours, she is doing child care beyond the six to eight hours laid down. Another aspect concerns holidays. The caregivers have found that when they need to take leave due to illness or other family committments, they cannot do so. Their leave, apart from the weekly day off, depends on the parents' leave pattern. This is one area in which caregivers have expressed great dissatisfaction.

Our social life has come to a standstill. I sometimes don't attend even marriages of close relatives which creates misunderstandings and loosens many of our family ties and friendships

- A caregiver

Another observed, - Since she is our neighbour, we find it difficult to say no to her. Everyday she says she will come at 6

o'clock but never comes before 8 o'clock. I cannot go out or do anything for my family.

Although, as earlier noted, factors like the age of the child and the area in which the family day care home is located do determine the charges to be fixed, payment is on the whole an area of discontent. Regular payments are not made nor is any additional payment made for any extra time the child is in care. Regarding charges, it was realised that the working women who make

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use of family day care services spend only eight per cent of their monthly income on child care service, whereas in developed countries they spend as much as thirty per cent of their income on child care. Even as there is an increase in the income of wagework, there is no simultaneous increase in child care fees. This slow change in earnings makes caregivers view child care as piece work; i.e., in order to increase their earnings they increase the number of children in their care, thus reducing service quality.

But still this is to be valued because love, security and a home environment are very important for a growing child.

### Conclusion

Family day care caregivers take responsibility for all aspects of children's lives, be it discipline, toilet training or speaking the first word. Their deep involvement may not be there always but they have to be alert to children's needs. The mixed age group and the group size have a direct impact on the practices of caregivers. The household responsibilities create many tasks throughout the day which have to be completed by the caregiver. Added to this are the child care tasks which multiply with any increase in group size and variations in the age groups.

Thus, efforts for interaction, stimulation and play are neglected, and the caregiver concentrates only on physical care. It appears that caregivers do not view

themselves as professionals doing a very serious and important task in taking care of children. This also makes them view their role just as an extension of their normal routine mothering role.

Considering the various inputs required to run a successful family day care service with a developmentally appropriate programme for the toddler and the schoolgoing child, it is evident that existing services, are satisfactory only in certain aspects. As noted in Chapter 1, family day care is a convenient arrangement for the mothers, and a convenient and dependable source of income for the not very highly educated, middle-aged housewife. They are informal and flexible arrangements but often the quality of care suffers through lack of education of the caregiver and her ignorance of the need for mental and physical stimulation for growing children, although mothers who value warmth and security highly, may feel that is what really matters.

Family day care is a convenient arrangement for the mothers, and a convenient and dependable source of income for the not very highly educated, middle-aged housewife. They are informal and flexible arrangements but often the quality of care suffers through lack of education of the caregiver and her ignorance of the need for mental and physical stimulation for growing children, although mothers who value warmth and security highly, may feel that is what really matters.

# 4. POLICY INITIATIVES

### The Issues

There are many issues that need to be considered if family day care is to be an effective child care service. Some initiatives have to be taken at policy level so that there are better quality family day care services, which reach out to all groups of working women and develop child-oriented programmes. These initiatives will have to be taken at government, academic and community level.

The potential of family day care as an appropriate form of child care is tremendous. But research today reveals two important findings:

- it serves only a select group of working women, and
- lack of professional approach makes it a mere custodial care programme.

To overcome these lacunae, intervention is needed in the following areas:

- a. Training
- b. Standards for family day care
- c. Information and referral system
- d. Professional support through an Association and
- e. Models of family day care.

### **Training**

In large part, the quality of family day care will be determined by the child care provider. Although the most preferred care, as earlier noted, is that provided by a grand mother or aunt, it appears that good care is more likely to be provided by caregivers who have better educational background and training. A study by the author (1992) has shown that experience in raising children does not guarantee good quality child care but that education and training play an important role in delivering quality child care services. But ironically the low status of child care as a profession does not attract highly educated women. Besides, training facilities hardly exist, creating barriers for developing professionals in the field of child care. The serious need for training and for efforts to organise it at various levels has become imperative.

For this, it would be helpful to make a profile of the family day care providers. They are, first of all, mature adult learners. However, since they have been away from any formal learning for many years, the training therefore has to be such that it is non-threatening, especially in the academic sense.

The needs of caregivers for training will vary greatly as they come from very different backgrounds. The cultural, socioeconomic and personal differences are important matters to be considered. The third issue is that caregivers suffer from professional isolation. They do not have any knowledge of what others are doing in terms of services. The fourth issue is that most caregivers do not visualise the need for training. They feel confident that since they are mothers, they know all that will be required of a caregiver and hence may not be motivated to attend a training programme. With these factors in mind it becomes essential that training is offered at various levels and that new and different training strategies are developed.

# Levels of Training

## • In-service training

This type of training programme will basically cater to training needs of providers already running family day care. The training is generally based on needs identified by researchers, experts and also sometimes as expressed by the providers. Generally, providers will express training needs in areas in which they are facing problems. Often the problems in the earlier stages centre around parent relations or on how they should develop certain skills. With experience, the focus on issues also changes. Irrespective of who identifies the issues, in-

service training helps caregivers in the following ways:

- It develops knowledge and skills necessary for delivery of quality care
- It helps caregivers to develop consistency and continuity in caregiving
- The caregivers come together as professionals to learn from each other and strengthen the child care service.

In this context an in-service training conducted at Tata Institute of Social Sciences is worth mentioning (Appendix 2). In 1987, there was a three-day orientation programme for family day care workers to bring together all providers on a common platform to exchange their experiences, share their problems and develop an understanding of the knowledge and skills needed to run a child care programme. One of the important outcomes of this programme was that all participants were able to realise that they were professionals and that there was need to do much more than what they were doing in the interest of the child. They were given inputs for developing appropriate programmes and practical tips for guiding children's development.

## • Pre-service training

As the need for child care is growing, there is also a need for expansion of family day care services. For this, pre-service training should be available so that women

who would like to enter this profession, will have a proper insight as to what exactly they need to do. The attempt made by Bombay University to start a three months training for Early Childhood Care seems to be the first step in this direction. The course is offered to any one who has completed high school. It combines theory and practicals and prepares the student in child care and in understanding the whole profession. Attempts are being made to give inputs in the same course for both child care and early education. Today many colleges offer courses in Early Childhood Care and Education after twelfth standard. This sudden growth in courses should be viewed with caution as Early Childhood Care and Education is serious business and if not carefully handled, the quality of caregivers trained in such programmes will be questionable.

### **Standards for Family Day Care**

The earlier discussion has shown that family day care in Bombay is the only paid child care which is readily available and which, to a certain extent, meets the needs of mothers and children. At the same time, because of no regulatory methods, the quality of care in family day care is very varied. In the interests of children, there is an urgent need to develop some measures to regulate the quality of care provided.

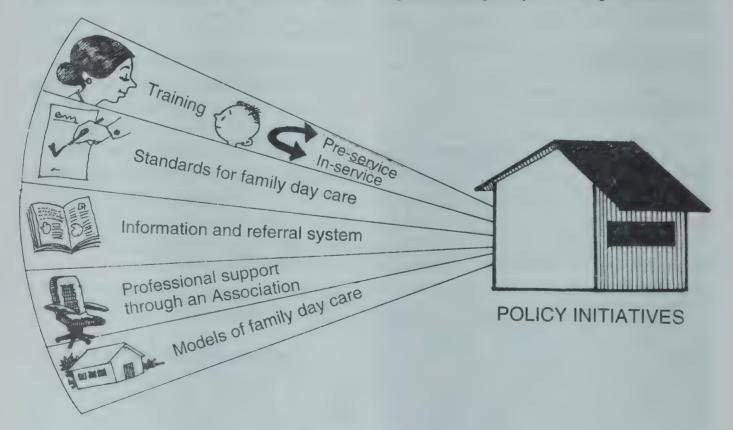


Fig 6: Policy Initiatives

There are many regulatory measures which have been operationalised in many of the developed countries. Gwen Morgan points out that licensing establishes a basic floor of quality and the ceiling is represented by the goals of the profession. Between the floor and ceiling are a number of regulatory and non - regulatory actions the state can take to enhance quality (e.g. staff credentials, supervision and monitoring).

The traditional approach for controlling quality in child care programmes has been licensing. It is considered a legal protection, where the minimum requirements for child health, safety and care are specified. The licensing requirements cannot be made unless providers are able to and are willing to meet them and parents are willing to support them. The licensing system to be implemented requires a large government machinery which would conduct inspections before issuing licenses and continue to inspect them to see there is maintenance of quality. In the context of family day care, this process becomes even more cumbersome. Family day care is spread in the city in all residential areas. Reaching out to them through inspections may prove a difficult task. Besides, providers may also fear and resent the intrusion of inspection into their home. As Morgan (1985) points out, house-keeping and child-rearing practices are part of the self-image of the homebased woman who may be afraid of being measured and possibly criticised on these matters. Licensing is a formal method and

this formalised process may seem too complicated to caregivers.

Family day care needs a less rigid and less formal method of regulation. Class (1968) was among the first few who suggested that registration may be a more appropriate method of regulation for family day care. The registration office can be very localised, serving a particular zone or ward. The registration office would basically have information on the family day care homes that are registered. It would be able to give information on the number of registered homes, geographic locations and also details regarding their functioning. The staff in such offices would have to be qualified in fields of social work and child development. These registration offices could be located in community centres, ward offices or academic institutions. The registering body has to set up norms for family day care like safety measures, number of children taken and staff qualification. The caregiver while registering declares that she meets the set standards. In the registration system it is mandatory to follow the set requirements; also this system does not call for inspection. However, parental complaints or visits, if revealing unsatisfactory conditions, can lead to the family day care being deregistered.

The registration system as a regulatory method has great potential to succeed. Family day care is still a developing system in India. For the kind of programme it is - informal, localised and



family based, it requires a regulatory method which is not threatening to its existence but a system which creates in the caregivers a sense of responsibility and the motivation to run quality programmes.

To begin with, there may be just recording of existing family day care services. Based on this, standards could be drawn up depending on what is existing and what can be achieved realistically in the given circumstances. Academic institutions and professional bodies like World Organisation for Pre-school Education (OMEP) and Indian Association for Pre-school Education (IAPE) should develop the system so that one maintains a balance between the informal and the professional.

Yet another system for developing quality family day care programme is the supervised family day care model, which is followed in Denmark, and is attractive for its simple but orderly functioning. This model is characterised by supervision by child development trainers who are responsible to a specific group of providers, children and parents. Supervisors recruit, select family day care providers, assist

providers to meet regulatory requirements, provide initial orientation and provide inservice training and support on a regular basis. Thus inputs can be given through parents and caregivers creating an enriched environment for children. In addition, the supervisory system gives scope to control quality right from the initiation of the programme.

The regulatory system can work well only if parents also start demanding quality child care programmes. Thus parental and community expectations should be raised so that efforts to achieve quality care will have public support. The effort of educating the public must be made by academicians and child development professionals. Literature on developmentally appropriate practices and standards for child care should be prepared to reach the caregivers and parents, and mass media should be fully utilised.

## Information and referral System

The informal nature of family day care makes it difficult to know of their existence and the services they offer.

The effort of educating the public must be made by academicians and child development professionals. Literature on developmentally appropriate practices and standards for child care should be prepared to reach the caregivers and parents, and mass media should be fully utilised.

Referral service is needed for parents, to inform them about the variety and quality of child care options. Such a consumer-oriented central information centre can help to raise the quality of programmes through educated parent choice and exchange of information among caregivers.

The resource and referral system will act as a clearing house within a defined community (city). This model helps in many ways, especially in the Indian setting where the day care system is not managed by a state or local organization. The resource and referral agency could provide information to parents by maintaining upto date information on names of available caregivers, their geographic areas, ages served, fees charged etc.

As the system develops it will be also possible to record complaints about caregivers to caution prospective parent users or even to start remedial work with such caregivers. The resource and referral centre could also undertake other roles to help and guide the caregiver.

Following the various studies undertaken by the author (1987, 1985) on child care, the first step which has been taken in the direction of resource and referral services is the development of a directory of child care services, both private and government aided, spread all over Bombay. The directory attempts to give information about caregivers,

geographic location, fees charged, the conditions and criteria for admission.

The authoralso intends to have regular workshops and printed material to educate the parent groups in understanding the concept of good quality group care and helping them make appropriate choices so that the children's developmental needs are met. Today there is also a need to educate parents and caregivers about child abuse. Child abuse can take place in both home and group settings. The adults in a child's life must know how to recognise and deal with physical and emotional abuse.

# Professional support by an association

The training programme conducted by the author showed that a continuous contact/dialogue/exchange was desired by the family day care caregivers. In response to this need the Family Day Care Association was formed in 1988. The Association aimed at:

- developing a support system
- taking up issues of pay and conditions of work
- sharing the care with parents
- · curriculum and
- training.

The Association has conducted several workshops. A lively discussion on rules for day care functioning in one workshop, was followed by other workshops on making play materials for children, prevention of accidents and water

play for children. Apart from these workshops, the Association also has a newsletter for its members which includes varied information - about developing a system of records activities for children, health related issues, day care around the world and parent relationships.

With more research work being done, more child care providers have been identified. Many have shown their willingness to be a part of this Association. Since the family day care providers have no other meeting ground, the Association becomes a strong base for coming together and solving the various problems and issues faced by them. As the other long term measures like registration may take time to come into effect, the Association will help in strengthening this form of child care.

The Association in the long run wishes to start a resource centre for caregivers which would offer a toy library, printed materials and guidance to all caregivers. The intention is to boost the morale of this group of workers and develop in them a professional expertise and knowledge so that the services offered become uniform in quality and of an acceptable standard.

# Two new challenges

In recapitulating, it can be noted that family day care has come into existence because of current social changes. Educated

women who started working but who had no family support for child care depended on informal arrangements with neighbours. Today this arrangement has become more formalised with the caregiver being paid for the child care she offers. Also, now the caregiver does not handle one child but at least six to eight children. Thus, family day care is an income-generating activity. Unfortunately no thought has been given either by caregivers or experts in the field, to develop family day care in a more professional way whereby both the mother and the child's needs are satisfied. Two issues which need to be addressed are:

- Using the family day care model to satisfy needs of various age-groups of children and
- Making family day care appropriate and available for mothers and children across all income groups and jobs.

### The older child

Today schoolgoing children are a group which finds that there is no other alternative to being latchkey children. First, there are very few day care centres and most often they cater mainly to children from zero to six years. Second is the family day care, where most children go very reluctantly. The reason is that there is little that family day care offers to them other than a place that gives security and food. They miss playing with their friends as they reach

home very late when mother comes from work. During their stay for two or three hours in family day care they spend some time on their school home-work but they have nothing interesting to do which helps in developing their hobbies or interests. Thus the growing years are being wasted and many talents and interests lost.

There could be many practical solutions for these issues. Some family day care should specialise in after and before school care. This could be taken up by housewives who do not wish to give many hours to the job. Hobby classes, arts, sports activities and games could be arranged for them. When children of one age-group come together they are bound to find many things to do collectively which is a good learning experience for them. This kind of age segregation can be done if caregivers in a locality come together and work out convenient age-groups to work with. This encourages exchange of client information and developing closer working relations. In the end, both mother and child may find family day care a more satisfying experience instead of being a chore.

Conceptually, this may seem to be contradictory in the light of earlier discussion that older children bring some activity into family day care by their movements to school and back; and the younger ones often help the older children in getting ready for school Why, one may ask, should one work towards a pattern of age segregation, when

the core of most family day care is the mixed age group? Age-segregated activities have their own value for child development, but may, in fact, only be possible when the child care business reaches a high degree of professionalism.

### The low-income mother

Today, because family day care is a paid arrangement it is considered to be suitable only to the educated middle-class who can buy the services. Child care services for the deprived and for women working in the unorganised sector are provided by voluntary organisations, sometimes with government aid. Compared to day care centres which require space, staff and equipment, family day care seems more lucrative. Voluntary organisations working in communities could identify women who do not go out for paid employment but take responsibility for care of four children each for which the voluntary organisation and the parent will pay. The organisation must take the responsibility to give inputs to the women to run the family day care with understanding and committment. Such family day care can provide women in poorer societies a sense of security as a known person would take care of the child. Caution should be taken to see that these do not turn out to be just child-minding places. Even though voluntary organisations may not take responsibility for child care, some guidelines should be there to prevent such care from becoming commercial types.

# 5. STEPS INTO THE FUTURE

Child care network

In the Indian context to develop any method to bring quality into family day care programmes is a very distant dream. Whether it is licensing or registration or any method to set standards, a lot of ground work has to be done for implementation and the implications in the long run, in terms of finances and personnel, are immense. However, the need for child care services is growing. Family day care is now becoming an accepted form of child care in urban cities. But as there are no expectations regarding its quality, the services

offered range from sheer neglect to developmentally appropriate. Knowing that day care has enormous implications for the development of children, efforts will have to be made at community level to enhance the quality of family day care programmes. Agencies concerned with establishing high-quality child care must take the responsibility of developing a network in their community.

The agency that undertakes the responsibility for networking should have a clear understanding about quality programmes. The objective of networking should be to bring caregivers out of virtual isolation, to get them to share ideas and experiences with each other, to develop knowledge and skills through workshops, discussions and to develop resource centres where caregivers would come and talk with staff members and collect materials through the lending library.

The objective of networking should be to bring caregivers out of virtual isolation, to share ideas and experiences with each other, to develop knowledge and skills through workshops, discussions and to develop resource centres where caregivers would come and talk with staff members and collect materials through the lending library.

Metworking must be the responsibility of a person from the field of child development. The role is to provide leadership in the development of the programmes, act as a liaison between the caregivers and other experts and be a guiding force to all members. The first step in networking is to

initiate interaction among caregivers. This gives scope to discuss many common problems like how to relate to parents, how to manage time etc. Along with this, monthly workshops could also be planned. Workshop subjects could cover a wide range of topics related to child development or administration of the programme. Since caregivers are not used to academic learning they would benefit more by experiential learning. Such an educational programme could also have field trips as part of the programme.

Networking leads to self-help. Since to be a part of networking is voluntary, only agencies and individuals who are interested in improving their skills will become members. Second, networking, through its inputs to members enhances the quality of child care. Thus two categories will emerge:

- Networking members providing better quality child care services and
- Non-networking members providing poor quality child care.

At this point of time if parents are educated and guided to select good quality family day care, there will be more demand for quality child care making it difficult for poor quality child care to survive. Thus networking could be a very strong agent in developing quality programmes. If the community, caregivers and parents are fully aware of the networking organisation, the sequential steps in

developing quality programmes can be taken up.

When every locality develops a networking organisation, this could be termed as a networking system. The networking systems would include all the networking organisations and their members. Through these systems could be developed the registration of child care services. The registration of networking members could be done by making it mandatory for every family day care to follow certain norms for it to be registered. However, some responsibilities lie with the networking organisation-to supervise and visit the family day care homes and to see that they are maintaining the standard.

Another important aspect is encouraging parents to report about their experiences. This helps the networking organisation to evaluate family day care and even consider deregistering those who do not meet the standards. For such a system to really function, the networking systems should be accepted by the community as organisations which can be trusted to solve issues regarding family day care. A lot of time will have to be given to caregivers, parents and community to develop this trust. Since a local organisation like a school/ academic institution or a voluntary organisation will be taking this role, there will hopefully be less apprehension in accepting the networking organisations which would ensure quality care.

## National efforts for advocacy

Though child care is now being recognised as an important service, few efforts have been made in expanding these services to reach working women and children in all sections of society. Today with nine crore women workers, the need for child care services is even greater. The creche scheme of the Central Social Welfare Board (CSWB) caters to a mere 2.5 lakh children, while statutory creches cater to just 50,000.

Some efforts for child care have been made by voluntary organisations and individuals. In urban cities like Bombay, Mahila Mandals and individuals have taken up this much needed task of child care services. However, their numbers are not known. They have been mushrooming as the need is growing, but these efforts are grossly inadequate.

The second issue regarding child care in India has been the virtual absence of varieties in child care programmes suited to local needs of working women and children. Except for day care centres, government's efforts to recognise other forms of child care are absent, resulting in standard stereotyped programmes which at times fail to reach the working mother and child. Family day care does not yet have the recognition it deserves.

The third issue of concern is the quality of child care in India. With no legal measures or monitoring, child care is anyone's job with freedom to do anything. Child care seems to show no concern for children's needs. With lack of space, materials, trained staff and programmes, the quality of child care is very poor.

Considering these issues women's organisations, concerned individuals and voluntary organisations committed to child care, have come together to form the Forum for Creche and Child Care Services. (FORCES), which campaigns for:

- a. Expansion, upgradation and strengthening of all existing programmes at the field implementation level to meet the demands of developmental day care
- b. Creating public awareness and motivation
- c. Developing decentralised structures at the grassroots
- d. Developing necessary training and support structures and
- e. Promoting flexible innovative approaches.

Such activities by this forum and other committed groups will go a long way not only in putting child care on the national agenda, but also in providing good quality day care to young children of working parents.

# Appendix 1

# FAMILY DAY CARE SCORING SHEET

Name and address of fa	amily day care home	S :							
I. Organisation		III. Material/Equipme	ent						
<ol> <li>Schedule</li> <li>Staff</li> <li>Adult-childratio</li> <li>Group size</li> <li>Age mix</li> </ol>	1 2 3 4 5 6 7	11. Routine care 12. Learning activities 13. Child safety  Total Materials/	1	2	3	4	5	6	7
Total organisation score		Equipment score:							
II. Personal care and	routine	IV. Child activities							
6. Nap and rest 7. Eating 8. Arrival/Departure 9. Personal grooming 10. Toileting/Diapering Total personal care routine score:	1 2 3 4 5 6 7 1 2 3 4 5 6 7 1 2 3 4 5 6 7	17. Creative activities	1 1 1 1	2 3 2 3 2 3 2 3	3 3 3	4 4 4	5 5 5 5	6 6 6	7 7 7
		Total Quality Score							

Appendix 2:

# THE ORIENTATION TRAINING PROGRAMME FOR WORKERS OF PRIVATE CRECHES IN GREATER BOMBAY

March 6-8, 1987

## **Objectives**

The objectives of the training were:

- 1. To give the caregivers a basic understanding of the needs of children.
- 2. To give the caregivers information on the planning and management of a day care programme.
- 3. To help the caregivers develop skills needed to work with children.

## Participation

The two research studies conducted in the Institute (Tata Institute of Social Sciences) had identified some sixty creches run by housewives in their own homes. In order that the participants would feel free to express themselves the training programme had to be conducted in a regional language. As the number of Marathi speaking housewives was high, it was decided that this first training programme would be conducted in Marathi in order to make it more effective. Twenty-two housewives participated in this training programme, even though it meant leaving their homes for three days.

### Literature

The relevant English material was identified and translated into Marathi. The literature was on various topics of significance to the caregivers. Some of the topics covered were children's physical, social, emotional and intellectual development, the uniqueness of each child; how to enhance the child's development, health and nutritional needs of children; rhymes and poems for children.

### Exhibition

An exhibition on Child Care was planned. For this, Mobile Creches, UNICEF and the Parenting Centre generously lent charts posters, toys and games for display. Besides, during the course on supervision of Early Childhood Programmes, the students of TISS had prepared low-cost materials for children which were also displayed. A slide-show on activities for children was arranged.

### Suggestions for improvement

1. More interaction between caregivers is essential. At least caregivers of particular areas must come together and work out

# Training Sessions

Session	Area covered
I. Information	<ol> <li>Problems of working mothers</li> <li>Concept of day care</li> <li>Day care in India</li> </ol>
II. Organisation	1. How to run a day care
III. Understanding child development	Child Nutrition     Child Health     Social and emotional needs of children and role of caregiver     Parent-caregiver relationship
IV. Developing skills to work with children	1. How to communicate with children 2. Play materials for learning and amusement for children
V. Open forum	

better ways of functioning so that they provide quality services and care to all age groups. One suggestion was that each caregiver could take up a particular age group so that managing the group of children becomes easier.

2. It was felt that all family day care homes should have fixed hours of working, and any child being looked after beyond those hours, should be charged extra per hour. If parents wish to have the child occasionally sleep over at the day care homes, the caregiver

must be acquainted with the parents and then only accept. She must decide on how to charge for such cases. All caregivers must make it clear to parents that even when the child does not attend the day care for a month, they will be charged.

- 3. All caregivers agreed that the age of the child, the number of hours in day care and the income of parents should help a caregiver judge how much should be charged.
- 4. Regarding holidays, all caregivers agreed on the practice of having bank holidays and Sundays as holidays. They also felt some vacation was necessary. Many agreed to a one-month break while some preferred a fortnight's break twice in a year.
- 5. It was suggested by many speakers that a day care home must follow certain norms. The caregivers must evolve a detailed form which gives details of the child, family and parental stand regarding certain crucial issues. The rules and regulations of the day care home should also be made clear to the parents in writing.
- 6. Regarding food provision, it was felt that both parents and caregivers should provide for food. Many caregivers said they preferred parents sending lunch with the child and that they would prepare only hot snacks.
- 7. The caregivers agreed that health could be one area of major conflict. Also, since

the child spends a longer time with them, they can be in a position to forewarn parents of any illness. They also realised that keeping growth charts and immunisation records are important. The caregivers were advised to have a visiting doctor once in three months at least, and also take it in writing from parents to allow the caregiver's physician to treat their child in an emergency. A suggestion offered to parents on not sending their children with infectious diseases was that caregivers must insist on a medical certificate This will help caregivers to convince other parents.

- 8. One of the participants suggested that a course on nursing and first aid would help the caregivers a lot. This caregiver herself being a nurse, was willing to guide the other caregivers for a twelve Sundays course on nursing. About ten caregivers (participants) were willing to take the course.
- 9. Talking of the basic equipment for a day care home, basic kitchen items must be available, but the milk cups should be separate. Regarding equipment for play activities, the caregivers were told to give more attention to this and make it a point to provide for the needs of children age-wise.
- 10. The speakers suggested that there should be a good relationship between parents and caregivers. Parents must contribute to the day care; for eg, if any parent is a doctor, she/he can offer their services. They can contribute by making teaching aids.

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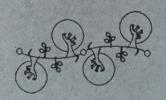
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documents innovative The SURAKSHA series programmes of Early Childhood Care and Education in India, especially those which address the intersecting needs of women, young children and girls. Carefully researched and written by scholars in the field, each study looks in depth at one programme, highlighting its achievements, philosophy and goals. The series as a whole represents the rich diversity of experience within the country, with a range in terms of geography, auspices and organisational pattern. Scholars and students of Child Development and child welfare would find the series an invaluable source of information, as well as policy makers, voluntary agencies and others concerned with programming for women's and children's development.



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